

**PERMIT / REVISION
DROP OFF SHEET
CITY OF LEESBURG**



PERMIT #

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DATE:

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JOB ADDRESS

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DROPPING OFF

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SETS OF

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AND

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SETS OF

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AND

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SETS OF

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AND

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SETS OF

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CHECK ONE OF THE FOLLOWING;

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THIS IS A **NEW** PROJECT (SUBMIT REQUIRED APPLICATION)

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THIS IS A **REVISION** TO A PERMIT APPLICATION FOR WHICH THE PERMIT **HAS NOT BEEN ISSUED**

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THIS IS IN REPONSE TO PLAN REVIEW COMMENTS

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THIS IS A MODIFICATION TO A PERMIT THAT **HAS BEEN ISSUED**

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THIS IS A CLARIFICATION FOR AN INSPECTION

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OTHER – EXPLAIN -

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ACTION I WOULD LIKE TAKEN;

CONTACT PERSON FOR QUESTIONS

PHONE #					
FAX #					
MAILING ADDRESS					
CITY		STATE		ZIP	